Nevada Division of Forestry State Fire Assistance Program

Applicant:

What is the duration of this grant request? (circle one)

Is this a continuing project from previous year/s? (circle one)

Please provide a timeline for the project (start to completion).

(For NDF Use Only)
State Submitting Project: Nevada Division of Forestry
State Priority #: ______

2004 Wildland Urban Interface Grant Application

Applicant Information

	Contact Person:		
1	Address:		
	City/Zip Code:		
	Phone(Work/Cell):		
	Email:		
	Fax:		
	Federal Tax ID # :		
		Requested Grant	t Amount/Scope of Work
	Dollar Amount Reque	ested: \$	Projected Match: \$
2	Name of Project:		
_	Please provide a des vegetation types.)	cription of the entire project. (If	applying for a fuels reduction project, please identify
	Provide a brief scope short, detailed explan	e of work: (The scope of work sh nation of how grant funds will be	nould be more specific than the project description. Provide a used.)
		-	Timeline

One Year

Yes

Two Years

No

	Project Summary					
	Project Category: (check all that apply)		Project Type: (check all that apply)			
4	Hazardous Fuels Reduction		Assessment/Scoping			
	Information & Education		Planning			
	Homeowner & Community Action		Information/Education			
			Implementation/Treatment			
			Monitoring/Evaluation			
			Worldoning/Evaluation			

		Com		Information		
		Comm	unity	/ Information		
	Community Name:					
	County:			Congress	sional District:	
5	Population/Number of Visitors:			Number of Home	es/Structures:	
	Latitude (decimal degrees):			Longitude (decir	mal degrees):	
	Number of Acres to be treated: (for fuels reduction projects)				Cost Per Acre: uction proiects)	
	Number of citizens to be reached: (for educational/prevention projects)			Number of Residen (for pla	nning projects)	
	Identify what organization in the co		nmur	nity is providing leade	ership for the p	project?
	Homeowners Association					
	Fire Department or Protection District: Local Government: County Government:					
	Non-Profit	Group:				
	Other (Please Sp	pecify):				
	Threat Description (Check what is threatened)			Hazard Description interface) See page definitions.	(Check approp 4 of Criteria and	riate type of d Instructions for
	Homes: Businesses: Watersheds: Infrastructure:			Interface: Intermix:		
	Economic Viability: Historic Structures:			Occluded Interface: Rural Interface:		

Interagency Collaboration

Identify the private, local, tribal, state, federal organizations and/or other (please specify) that are contributing or participating in completion of this project. Include a letter, on letterhead, from each identified partner, signed by an authorized representative of that agency or organization. The letter should identify how the partner will contribute to completion of this project (funding, personnel, equipment, etc.) Do not include more than three letters of support.

NOTE: If the proposed project is on property belonging to a group other than the applicant, you must include a letter from the landowner/manager granting permission for the work to be completed on that property.

	Grant Contributors (Matching Share) (Applications will be disqualified if insufficient match is identified; federal dollars DO NOT qualify) Please specify each match contributor and the dollar amount of each contribution.						
	Contributors: (please specify)						TOTAL
7	Dollars (Hard Match):						
	In-Kind (Soft Match):						
	TOTAL:						

	Total Project Expense (include matching share from above and a description of each line item)					
		Grant Share (\$ Amount Requested)	Match (from above)		TOTAL	
8			Dollars	In-Kind		
	Personnel/Labor :					
	Operating:					
	Travel :					
	Contractual Services :					
	Equipment :					
	Indirect Costs :					
	TOTAL:					

	Planned Project Maintenance/Project Manager					
	Please describe all planned project maintenance if funded.					
9						
	Please provide the name and a brief description of the qualifications of the project manager for this project.					

	Signature Block					
		TV-1				
10	Authorized Signature Date	Title				

With this application—Please provide a 7.5° map, an area map, and a state map with the project site clearly identified on each map.

If you have any questions please contact Kacey KC at 775-684-2531 Please return applications to: Nevada Division of Forestry, Attn: Kacey KC, 2525 South Carson Street, Carson City, NV 89701